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PTO/SB/01 (10/00)

OMB 0651-0032

Approved for use through 10/31/02

US Patent and Trademark Office; US DEPARTMENT OF COMMERCE

<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION</b>  <input type="checkbox"/> Declaration Submitted With Initial Filing    OR <input checked="" type="checkbox"/> Declaration Submitted After Initial Filing	Attorney Docket Number	P-128-US1
	First Named Inventor	Moran et al.
	COMPLETE IF KNOWN	
	Application Number	10/292,211
	Filing Date	November 12, 2002
	Group Art Unit	Not yet assigned
	Examiner Name	Not yet assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ARYL ANILINE BETA-2 ADRENERGIC RECEPTOR AGONISTS

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on November 12, 2002 as United States Application Number or PCT International Application Number 10/292,211 and was amended (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 USC §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under 35 USC §119(e) of any United States provisional application(s) listed below.		
Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental sheet attached hereto.
60/338,194	11/13/2001	

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<b>DECLARATION</b>	Page 2
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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

US Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional US or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

I hereby appoint the following attorney(s) and agent(s) to prosecute said application and to transact all business in the Patent and Trademark Office connected therewith and to file, prosecute and transact all business in connection with international applications directed to said invention:

the practioners associated with customer number 27,038, including those listed below;



2 7 0 3 8

and said David E. Boone to have in addition the power to revoke the power granted to all others listed below and the power to grant associate powers of attorney.

Name	Registration Number	Name	Registration Number
<b>David E. Boone</b>	<b>27,857</b>	<b>Jeffrey A. Hagenah</b>	<b>35,175</b>
<b>Joyce G. Cohen</b>	<b>44,622</b>	<b>Roberta P. Saxon</b>	<b>43,087</b>

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to:

**David E. Boone**  
**Theravance, Inc.**  
**901 Gateway Boulevard**  
**South San Francisco, CA 94080**

Telephone <b>650/808-6000</b>	Fax <b>650/808-6078</b>
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Name of Sole or First Inventor:** ☐ A petition has been filed for this unsigned inventor

Given Name	Edmund	Middle Initial	J.	Family Name	Moran	Suffix, e.g., Jr.
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Inventor's Signature	Date
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12/03/02

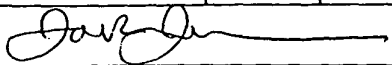
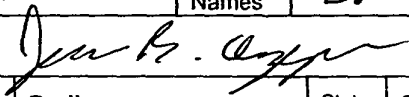
Residence: City	San Francisco	State	CA	Country	U.S.A.	Citizenship	Canada
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Mailing Address	131 Chaves
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City	San Francisco	State	CA	Zip	94127	Country	U.S.A.
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☐ Additional inventors are being named on supplemental sheet(s) attached hereto

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DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet			
<b>Name of Second Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	John	Middle Names	R.	Family Name	Jacobsen	Suffix, e.g., Jr.	
Inventor's Signature				Date	12/3/02		
Residence: City	San Mateo	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Mailing Address	16 Oak Valley Road						
City	San Mateo	State	CA	Zip	94402	Country	U.S.A.
<b>Name of Third Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	James	Middle Names	B.	Family Name	Aggen	Suffix, e.g., Jr.	
Inventor's Signature				Date	11/25/02		
Residence: City	Burlingame	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Mailing Address	1105 Bayswater Avenue #1						
City	Burlingame	State	CA	Zip	94010	Country	U. S. A.
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix, e.g., Jr.	
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Mailing Address							
City		State		Zip		Country	
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix, e.g., Jr.	
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Mailing Address							
City		State		Zip		Country	
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix, e.g., Jr.	
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Mailing Address							
City		State		Zip		Country	